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Patent

Attorney's Docket No. 026290-021

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of )

Marco SATTA )

Application No.: 10/072,987 )

Filed: February 12, 2002 )

For: COMPOSITE ELASTOMER/PTFE SEAL, )  
IN PARTICULAR FOR INSERTION )  
BETWEEN RELATIVELY ROTATING )  
MEMBERS SUBJECT TO OSCILLATION )

Group Art Unit: 3676

Examiner: E. Peavey

Confirmation No.: 3522

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JUL 17 2003

GROUP 3600

AMENDMENT/REPLY TRANSMITTAL LETTER

Commissioner for Patents  
P. O. Box 1450  
Alexandria, Virginia 22313-1450

Sir:

Enclosed is a reply for the above-identified patent application.

☐ A Petition for Extension of Time is also enclosed.

☐ A Terminal Disclaimer and the ☐ \$55.00 (2814) ☐ \$110.00 (1814) fee due under 37 C.F.R. § 1.20(d) are also enclosed.

☐ Also enclosed is/are \_\_\_\_\_.

☐ Small entity status is hereby claimed.

☐ Applicant(s) request continued examination under 37 C.F.R. § 1.114 and enclose the ☐ \$375.00 (2801) ☐ \$750.00 (1801) fee due under 37 C.F.R. § 1.17(e).

☐ Applicant(s) previously submitted \_\_\_\_\_, on \_\_\_\_\_, for which continued examination is requested.

☐ Applicant(s) request suspension of action by the Office until at least \_\_\_\_\_, which does not exceed three months from the filing of this RCE, in accordance with 37 C.F.R. § 1.103(c). The required fee under 37 C.F.R. § 1.17(i) is enclosed.

☐ A Request for Entry and Consideration of Submission under 37 C.F.R. § 1.129(a) (1809/2809) is also enclosed.

☐ No additional claim fee is required.

☒ An additional claim fee is required, and is calculated as shown below:

AMENDED CLAIMS					
	NO. OF CLAIMS	HIGHEST NO. OF CLAIMS PREVIOUSLY PAID FOR	EXTRA CLAIMS	RATE	ADDT'L FEE
Total Claims	23	MINUS 20 =	3	× \$18.00 (1202) =	54.00
Independent Claims	4	MINUS 3 =	1	× \$84.00 (1201) =	84.00
If Amendment adds multiple dependent claims, add \$280.00 (1203)					0.00
Total Amendment Fee					138.00
If small entity status is claimed, subtract 50% of Total Amendment Fee					0.00
TOTAL ADDITIONAL FEE DUE FOR THIS AMENDMENT					138.00

☒ A claim fee in the amount of \$ 138.00 is enclosed.

☐ Charge \$ \_\_\_\_\_ to Deposit Account No. 02-4800.

The Commissioner is hereby authorized to charge any appropriate fees under 37 C.F.R. §§ 1.16, 1.17, 1.20(d) and 1.21 that may be required by this paper, and to credit any overpayment, to Deposit Account No. 02-4800. This paper is submitted in duplicate.

Respectfully submitted,

BURNS, DOANE, SWECKER & MATHIS, L.L.P.

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Date: July 9, 2003